



T.RowePrice

2026

Benefits Guide



What's Inside

At T. Rowe Price, you can grow and make a difference in ways that matter to you. That means we want you to have an experience that's focused on your needs, both at work and in support of your life outside work. Our firm strives to enrich associates' lives by providing a broad range of benefits that set us apart and make this a great place to work.

Current associates

Annual open enrollment is your opportunity to consider changes to your benefits for the upcoming plan year.

- Open Enrollment is typically held in the fall every year. Visit mytrpwellness.com (pw: trpwellness) for more information.
- If you do not complete the enrollment process, your existing elections will carry forward with any cost changes. This does not include your Flexible Spending Account (Health Care and Dependent Care FSA) elections; you must renew these each year.

New hires

- Your coverage will begin on the 1st day of the month following your date of hire.
- You have 30 calendar days from your date of hire to enroll in your benefits. If you do not enroll by the deadline, your benefits will be as follows:
 - **Medical/Prescription:** single coverage High Deductible Health Plan
 - **Dental/Vision:** waive
 - **Life:** company provided three times salary
 - **Flexible Spending Accounts:** waive

Once you are ready to make your selections, review the [Enrolling and Resources section](#) on [page 30](#) of this guide.

Life event changes

Qualifying life events allow you to update your elections outside the annual open enrollment window. You must submit your election changes and documentation of your event within 30 days of the event. See [examples of life events](#) on [page 7](#).

If you have questions regarding your enrollment or your benefits package, please contact HR Shared Services at [myHR](#) or 1-877-HR-SERVE.

Our flexible benefit plan is intended to be a "cafeteria plan," meeting the requirements of Section 125 of the Internal Revenue Code of 1986, as amended. This plan is to be interpreted as consistent in all respects with the requirements of the code.

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This guide offers general information about the T. Rowe Price health and welfare plans. Complete details can be found in the legal plan documents and contracts that govern the plans. If there is a difference between this information and the plan documents and contracts, the plan documents and contracts govern. T. Rowe Price reserves the right to amend or terminate its plans at any time.



What's New for 2026

What's new

- Associate rates trend upward every year; **you will have an increase in your cost for coverage.**
- **Our High Deductible Health Plan's deductible will increase** to meet the new IRS regulations. [See page 9](#) for new deductible and out-of-pocket maximum amounts.
- **MetLife Legal Plan** enrollment is now in Workday. Enrollees will also have access to the [Family First](#) care giving enhancement that can help solve core drivers of caregiver-related illness.

What do you need to do?

- Review your current benefit enrollment. Did anything change this year for you and your family? Review your covered dependents and beneficiaries for your life insurance, 401(k), and stock purchase plan.
- Review this guide for benefit plan information.
- Need to make changes? Go to [Workday](#).
- Happy with your current enrollment? Your existing elections will carry forward with any cost changes, **except** for your Flexible Spending Account elections, which you must renew each year.

To learn more and ask questions:

- **T. Rowe Price associates can contact Goldman Sachs Wealth Services**—our financial coaching vendor, can be reached at **1-888-295-9868** (Monday–Friday, 9 a.m.–5 p.m. ET, and evenings by appointment). They offer one-on-one telephone “coaching” sessions and host open enrollment [webinars](#).
- **Visit [mytrpwellness.com](#)**—This website has all of the details about your benefit choices, including medical plan comparison tools.



Eligibility

This section provides important information about your eligible dependents and the qualifying life events that allow you to make changes to your benefit plans during the year.

Eligible associates

Eligible associates may participate in T. Rowe Price benefit plans as outlined in the chart to the right.

Regular¹ full-time and part-time associates who normally work...

| Benefit Plans | 30 Hours or More per Week | 20–29 Hours per Week | 19 Hours or Fewer per Week |
|--|---------------------------|----------------------|----------------------------|
| Medical/Prescription and Dental/Vision | X | X | |
| Health Savings Account (HSA) | X | X | |
| Flexible Spending Accounts (FSAs) | X | X | X |
| Voluntary Benefits | X | X | |
| Disability Benefits and Survivor Benefits | X | | |
| Employee Stock Purchase Plan (ESPP) ² | X | X | X |
| U.S. Retirement Program | X | X | X |
| Employee Assistance Program | X | X | X |
| Exercise and Fitness Reimbursement | X | X | |
| Adoption Assistance | X | X | |
| Backup Care | X | X | |
| Parental Leave | X | | |
| Tuition Assistance | X | X ³ | |
| Time Off – Vacation, etc. | X | X | |

¹ Temporary and contract employees are not “regular” associates.

² Associates must be over the age of majority in the state in which they live to participate in the ESPP.

³ Undergraduate courses only.



Eligible Dependents

Spouses, domestic partners, and children who are eligible dependents are also eligible for medical/prescription, dental/vision, and supplemental life insurance coverage.

Spouse

Spouse is defined as a person who is married to the associate in a ceremony recognized by the law of the state of residence.

Domestic partner¹

Domestic partner is defined as a person who is at least 18 years of age, is in an exclusive relationship with the associate, is not a blood relation closer than the law allows for marriage, is not legally married to anyone else, is financially interdependent with the associate, and has shared a residence with the associate for a minimum of 12 months.

A signed affidavit along with acceptable proof of a shared residence for at least 12 months must be provided to HR Shared Services before enrollment of a domestic partner can be completed. Any two of the following are acceptable:

- Common ownership of real property (joint deed or mortgage agreement)
- Common leasehold interest in property
- Common ownership of a motor vehicle
- Driver's license listing a common address
- Proof of bank accounts or credit accounts listing a common address
- Utility bills listing a common address

Child(ren)

An eligible child is defined as an associate's (or eligible domestic partner's¹) biological child, stepchild, legally adopted child or one who is lawfully placed with the associate for legal adoption, or foster child who is placed with the associate by an authorized placement agency or by judgment, decree, or other court order.

You may cover a child under T. Rowe Price's plans until the end of the month in which the child turns age 26.

Disabled child

Disabled child is defined as an unmarried child who is mentally or physically disabled and chiefly dependent on the associate for support and maintenance. A disabled child over the age of 26 can continue coverage until the end of the year in which the child is determined to no longer be disabled. The child must have been (i) disabled on the date the child turned 26, as certified by a physician, and (ii) either (A) covered as a dependent immediately prior to applying for this coverage or (B) eligible to be covered as a dependent on the date the child turned 26 but was covered under another health plan and can provide evidence of creditable health plan coverage from the date the dependent turned age 26 through the date that the associate requests coverage. Annually, the disability must be medically certified by a physician.

¹ Due to IRS regulations, the fair market value of domestic partner and domestic partner child(ren) coverage is taxable to the associate.



Qualifying Life Events

The benefits you choose will be effective through the end of the calendar year. You cannot make changes to your coverage during the year unless you have a qualified change in employment or family status.

Qualifying life events must be reported to [HR Shared Services](#), with the appropriate documentation, within 30 calendar days of the date of the event. Approved changes are effective the first day of the month following the event, except medical/prescription and dental/vision coverage in cases of birth and adoption, which are effective on the date of the event.

Qualifying life events include:

- Marriage or divorce
- Commencement or termination of a recognized domestic partnership
- Birth or adoption of a child
- Death of a spouse, domestic partner, or dependent
- Commencement or termination of a spouse's or domestic partner's employment
- Taking or returning from an unpaid leave of absence
- Switching from part-time to full-time employment status, or vice versa, by you or your spouse/ domestic partner
- Significant change in any medical coverage of a spouse or domestic partner that is attributable to an employment-related event (for example, benefit changes that result from a spouse's open enrollment period)
- An event that causes a dependent to satisfy or cease to satisfy eligibility requirements
- A reduction in average weekly hours worked that, but for the terms of a plan, would result in your not being eligible for coverage under that plan
- Eligibility for and enrollment in a health plan offered through a Healthcare Marketplace

Due to IRS regulations, special rules apply for qualifying life events involving domestic partners and/or domestic partner children. Please contact [HR Shared Services](#) for more information.

Notice of Special Enrollment Rights

If you decline enrollment in T. Rowe Price's health care coverage for yourself or your dependents (including your spouse) because of other health insurance coverage, you may be able to enroll yourself or your dependents in the Flexible Benefits Plan in the future, provided that you request enrollment within 30 calendar days after your other coverage ends. In addition, if you have a new dependent as a result of marriage, birth, adoption, or placement for adoption, you may be able to enroll yourself and your dependents, provided that you request enrollment within 30 calendar days after the marriage, birth, adoption, or placement for adoption. Also, if you or your dependents experience a loss of eligibility for Medicaid or your State Children's Health Insurance Program (CHIP) coverage or become eligible for premium assistance under an optional state Medicaid or CHIP program that would pay the employee's portion of the health insurance premium, you may be able to enroll, provided that you request enrollment within 60 calendar days of loss of coverage (loss) or when eligibility is determined (enrollment).



Medical Plans

You may choose between two medical plans administered by Aetna: the High-Deductible Health Plan (HDHP) with Health Savings Account (HSA) and the Preferred Provider Organization (PPO) Plan with Health Reimbursement Account (HRA).

Both plans are similar in some important ways:

- You can see in-network providers without needing a referral from your primary care physician.
- They both offer in-network and out-of-network coverage.
- **Preventive services are covered at 100% in network.**
- Each is paired with an account that is partially funded by T. Rowe Price to cover some eligible medical expenses.
- For non-preventive services, you must first meet the plan deductible. Amounts in your health reimbursement account or health savings account ([see page 10](#)) can help with meeting the deductible.
- After you meet your annual deductible, you pay your share of the cost (coinsurance) until you reach the out-of-pocket maximum. Then the plan pays the rest for most medical expenses.

How the plans are different:

| Plan Feature | High-Deductible Health Plan (HDHP) w/Health Savings Account (HSA) | Preferred Provider Organization (PPO) Plan w/Health Reimbursement Account (HRA) |
|---|---|---|
| Your cost per paycheck | Lower | Higher |
| Your deductible | Higher | Lower |
| Tax-advantaged account that allows you to set aside and invest money for medical expenses down the road | Account available | Not available with this plan |
| Your share of the cost of prescription drugs | Coinsurance after meeting plan deductible | Copayment; not subject to deductible |

For more detailed information on these plans, view the Medical Plan Comparison Chart on the next page.



Medical Plan Comparison Chart

Here's a look at how the two medical plan options compare. Please note that family coverage refers to all other levels that include more than one individual (i.e., associate plus spouse/domestic partner, associate plus child(ren), or family).

Medical plan comparison chart

| | HDHP w/HSA | | PPO Plan w/HRA | |
|--|--|---|--|---|
| Annual contribution to HRA/HSA by T. Rowe Price <i>This is available to cover your initial expenses</i> | -\$750 individual ¹ -\$1,500 family ¹ | | -\$200 individual -\$400 family | |
| Annual deductible <i>The HRA/HSA can pay part of this amount</i> | -\$1,700 individual -\$3,400 family | | -\$500 individual -\$1,000 family | |
| Cost of Care | In Network | Out of Network ² | In Network | Out of Network ² |
| Preventive services <i>Your share of the cost of preventive care and screenings</i> | \$0 | 40% | \$0 | 30% |
| Your coinsurance <i>Your share of the cost of non-preventive care after the deductible is met</i> | 20% | 40% | 10% | 30% |
| Out-of-pocket maximum ³ <i>Maximum you will pay for care each year</i> | -\$3,400 individual -\$6,800 family | -\$6,800 individual -\$13,600 family | -\$3,000 individual -\$6,000 family | -\$6,000 individual -\$12,000 family |

For a more detailed comparison of the plans, such as coverage for advanced infertility, see the [Appendix on page 34](#). The plans' Summary of Benefits and Coverage can be found on mytrpwellness.com.

¹ The firm's contribution to the HSA is prorated if the HSA is not elected as of January 1 or if your coverage level changes during the plan year.
² If you use out-of-network providers, you are responsible for any amount above the recognized charge for the service.
³ Amounts above the recognized charge do not count toward the out-of-pocket maximum. Covered services apply towards the in-network and out-of-network out-of-pocket maximums.

More about how the plans work

There are a number of tools available to help you compare the plans and select the plan that best meets the needs of you and your family. Check out the [Resources section on page 31](#) for more information.

Key terms to know

- **PPO Plan:** Preferred Provider Organization (PPO) plans allow you to visit any in-network physician or health care provider you wish without first requiring a referral from a primary care physician.
- **HRA:** This is short for health reimbursement account. The firm partially funds this account for you to help defray the cost of some eligible out-of-pocket expenses. You cannot contribute to an HRA.
- **HDHP:** A High-Deductible Health Plan is a medical plan with a high deductible and is paired with a tax-free health savings account to save for eligible medical expenses. This plan allows you to visit any in-network physician or health care provider you wish without first requiring a referral from a primary care physician.
- **HSA:** This is short for health savings account. Both you and the firm can contribute to your health savings account. Your HSA can be used to cover eligible out-of-pocket medical expenses, and the money rolls over from year to year.
- **Deductible:** This is the amount of covered expenses you are responsible for paying out of pocket before the plan begins to pay benefits.
- **Coinsurance:** After you meet the deductible, you pay a percentage of the cost of care.
- **Out-of-Pocket Maximum:** After you meet the out-of-pocket maximum, eligible medical expenses are covered at 100% by the plan.



Health Reimbursement Account/ Health Savings Account (HRA/HSA)

How the HRA and HSA are different

Both of these accounts are good ways of paying for covered, out-of-pocket medical and prescription drug expenses, including deductibles, coinsurance, and copayments. But they are very different, as explained in the chart below.

| Key Features | HSA ¹ | HRA |
|---|--|--|
| Eligibility | Must be enrolled in HDHP, cannot be covered under spouse FSA plan, and cannot be enrolled in Medicare OR military health plan | Must be enrolled in PPO |
| T. Rowe Price contributes | \$750 Single / \$1,500 Family | \$200 Single / \$400 Family |
| Who owns the account? | You | T. Rowe Price |
| Can you contribute? | Yes, pretax up to \$4,400 (single) or \$8,750 (family) annually ² | No |
| Can you make catch-up contributions if age 55+? | Yes, an additional \$1,000 is allowed annually; or if both spouses are 55+, \$1,000 each is allowed to separate HSAs | No |
| Is there potential for investment earnings? | Yes, money earns interest tax-free until you take it out; your balance over \$1,000 can be invested in a range of mutual funds | No |
| Can you earn incentives for taking healthy actions? | Yes, up to \$300 additional based on participation in Healthy Rewards program | Yes, up to \$300 additional based on participation in Healthy Rewards |
| How are the dollars used? | You elect when to use your funds | Automatic—HRA funds used first before you pay out of pocket |
| What happens if I have dollars left at the end of the year? | Balance carries over from year to year; you may no longer contribute once retired or enrolled in Medicare, but you may continue to spend down balance | Balance carries over from year to year |
| Is it portable? | Yes, funds can be transferred to another HSA administrator | No, funds revert to T. Rowe Price upon plan and employment termination |
| Can you have a Flexible Spending Account (FSA) too? | You may enroll in the HSA-compatible Health Care FSA (for dental and vision expenses only), but neither you nor your spouse/partner can have a traditional health care FSA | Yes |

¹ The HSA, transactions, and holdings are not reportable per the T. Rowe Price Code of Ethics and should not be reported in myTRPcompliance.

² The total of all contributions—yours, the firm’s, and any Healthy Rewards incentives—cannot exceed this annual limit.



Health Savings Accounts (HSAs)

When you enroll in the Aetna High Deductible Health Plan (HDHP), you can also open a Health Savings Account (HSA), an account that helps you save for future health expenses.

Much like you use your 401(k) to save for retirement, you'll use your HSA to save for future health expenses.

Both T. Rowe Price and you will make pretax contributions to the account, which earns interest tax-free. Your account balance greater than \$1,000 can be invested. You can use your HSA money whenever you need it; withdrawals, including investment earnings for qualified health expenses, are tax-free.

HSAs do not follow the use or lose rule, like Flexible Spending Accounts. The money is yours until you use it.

Your HSA belongs to you, so you can use the money in your account to pay for qualified health care expenses throughout your life—including retirement. There is no time limit on when to spend your HSA funds. Even if you change health plans, switch jobs, or retire, your HSA goes with you.

To help your account to grow, T. Rowe Price will help fund your HSA on an annual basis. You will receive a pretax contribution of up to \$750 for individual coverage and up to \$1,500 for family coverage.

If you are joining the plan midyear, the firm's contribution will be prorated and paid on a per pay period basis.

| | 2026 Annual IRS Limit |
|------------------|-----------------------|
| Single | \$4,400 |
| Family | \$8,750 |
| Catch-up age 55+ | +\$1,000 |

Important reminders for contributing to an HSA:

- You must be enrolled in only an HDHP to contribute to the HSA.
- You cannot enroll in both an HSA and a Health Care FSA. This includes a spouse's health care FSA.
- You cannot use your HSA money to pay eligible expenses for a domestic partner or for children who are not considered a dependent for tax purposes. Your domestic partner may be able to open a personal HSA and make contributions on a tax-deductible basis.
- You are not eligible for an HSA if you are enrolled in Medicare or are receiving VA benefits.
- Midyear coverage or enrollment changes: Generally, the IRS limits the amount you can contribute to an HSA based on the number of months you are enrolled in an HDHP.
 - For example, using 2026 IRS limits, if you enroll in individual coverage with the HDHP July 1 to December 31, your HSA contribution should be prorated to \$2,200 ($(\$4,400/12 \text{ months} = \$366.67) \times 6 \text{ months} = \$2,200$). However, under the IRS "last month rule," you may be able to contribute the full-year amount.
 - If you are enrolled as of December 1, you can contribute the maximum you are eligible for, \$4,400. The last month rule gives you this benefit as long as you stay enrolled in the HDHP for the next full calendar year. Failure to stay enrolled for the next full calendar year has a 10% penalty plus ordinary income tax on your contributions when you file your tax return. You are responsible for ensuring you stay within the set limits.



Flexible Spending Accounts (FSAs)

Reduce your taxes and receive reimbursement for eligible health care and/or dependent care expenses. Once elected, you may not change or stop the contributions unless you have a qualifying life event. For new hires, this coverage is effective on the first day of the month following your date of hire.

| | Health Care FSA | HSA-Compatible Health Care FSA | Dependent Care FSA |
|--|---|---|---|
| How FSAs work | <p>Reimburses you for health, dental, and other medically necessary costs incurred by you or your eligible dependents not covered by your benefit plans. You can contribute between \$120 and \$3,300 per year.</p> <p>Eligible over-the-counter medicines or drugs (such as aspirin, ibuprofen, allergy medications, contact lens solution, etc.) can be reimbursed without a health care provider’s prescription.</p> <p>You may not participate in this plan if you enroll in an HSA.</p> | <p>If you have selected the HDHP with HSA through T. Rowe Price, you have the option of enrolling in an HSA-compatible FSA. Your HSA-compatible FSA can be used to cover eligible out-of-pocket vision and dental expenses during a calendar year but not medical expenses. You can contribute between \$120 and \$3,300 per year.</p> | <p>Reimburses you for dependent care expenses for a child under age 13 or a physically or mentally disabled parent, child, or other relative you claim as a dependent for federal tax purposes. You can contribute between \$120 and \$7,500 per year. (Married filing separately maximum is \$3,750.)</p> <p>Each year FSA plans must pass a nondiscrimination test to show that they do not favor highly compensated employees regarding eligibility, contributions, and benefits. If T. Rowe Price’s plans do not pass the test, T. Rowe Price may reduce your election(s) during the year if you are a highly compensated employee as defined by the Internal Revenue Code (those who earned at least \$160,000 in 2025). The Benefits team will notify you if it becomes necessary to reduce your contributions.</p> |
| You can use the FSAs for the following¹— and more! | <ul style="list-style-type: none"> –Copayments, deductibles, or out-of-pocket doctor or hospital costs –LASIK surgery –Vision exams, contact lenses, and eyewear costs –Non-cosmetic adult orthodontia –Prescription drug costs or eligible over-the-counter drugs prescribed by a health care provider | <ul style="list-style-type: none"> –LASIK surgery –Vision exams, contact lenses, and eyewear costs –Non-cosmetic adult orthodontia –Dental deductibles, copays, and coinsurance | <ul style="list-style-type: none"> –Dependent care costs, such as child day care, that enable both you and your spouse to work –Annual disabled care expenses –After-school programs and summer day camps –Eldercare (when the dependent resides in your home) |
| Important information regarding claim submission | <p>Eligible expenses incurred during the plan year must be submitted by March 31 of the following calendar year. Associates can carry over up to \$660 of unused health care FSA funds and HSA-compatible health care FSA funds to the next plan year. Any remaining health care FSA or HSA-compatible health care FSA balance over \$660 and all dependent care FSA balances will be forfeited. Domestic partner and/or domestic partner children’s claims are not eligible for reimbursement under these plans.</p> | | |

¹ Refer to IRS Publication 969 for additional information.



Prescription Drug Coverage

When you enroll in medical coverage, you and your covered family members also receive prescription drug coverage administered by Express Scripts. Your medication will be considered either “preferred” or “non-preferred” based on the plan’s formulary, which is a list of medications covered under the plan. Drugs not on the formulary list are generally not covered unless approved by Express Scripts.

To view the most up-to-date formulary list, visit [express-scripts.com](https://www.express-scripts.com). When purchasing prescription drugs at a retail pharmacy, you receive up to a 30-day supply. When purchasing prescriptions by mail order, from Express Scripts mail-order pharmacy, you may receive up to a 90-day supply at one time.

Here’s a look at how prescription drugs are covered under each plan option:

| Prescription Drugs ¹ | HDHP w/HSA | | PPO Plan w/HRA | |
|---------------------------------|--------------------------------------|--|--------------------------------------|--|
| | Retail <i>Up to 30-day supply</i> | Mail Order <i>Up to 90-day supply</i> | Retail <i>Up to 30-day supply</i> | Mail Order <i>Up to 90-day supply</i> |
| Generic drugs | | | \$10 copayment ³ | \$20 copayment ³ |
| Preferred drugs | 20% coinsurance ² | 20% coinsurance ² | \$35 copayment ³ | \$70 copayment ³ |
| Non-preferred drugs | | | \$70 copayment ³ | \$140 copayment ³ |

¹ Drugs that are excluded from the plan’s formulary are not covered under the plan. Other non-covered items include, but are not limited to, immunizations and over-the-counter medications. Fertility medications are covered under the Progyny benefit and are subject to the medical plan coinsurance for the medical plan you are enrolled in. As new drugs are approved by the FDA, the drug manufacturer may change the generic/brand name code on an existing drug, causing the copayment level to vary. If a generic is available and you choose a brand name, you pay the difference in cost between the brand name and generic drug plus generic copay/coinsurance.

² Coinsurance applies after the annual deductible has been satisfied. Under the HDHP, the prescription coinsurance applies to the out-of-pocket maximum.

³ Copayment does not count toward your annual deductible, but it does apply to the annual out-of-pocket maximum.



Dental and Vision Plan

When you elect dental coverage, you also receive vision coverage.

Dental

Our dental plan is administered by [MetLife](#). It's a PPO plan, which offers both in- and out-of-network coverage. The chart below provides an overview of your dental plan.

| | In Network—Your Cost Share |
|---|--|
| Annual deductible | \$50 per person; \$150 family maximum |
| Preventive care <i>Two cleanings per calendar year</i> | Covered at 100% |
| Basic services <i>Fillings, simple extractions, root canals</i> | 20% (after deductible) |
| Major services <i>Anesthesia, crowns, bridges, oral surgery, surgical extractions</i> | 50% (after deductible) |
| Orthodontics <i>Lifetime maximum of \$2,000</i> | 50% |
| Calendar year maximum <i>Combined in and out of network; does not include orthodontics</i> | Plan pays up to \$3,000 per person (after deductible) |
| Other services/features | Visit the Dental section of myHR located on the Exchange |

Vision

Our vision plan is administered by EyeMed. The plan provides the highest value when you see an EyeMed network provider. To find a network provider, go to [eyemedvisioncare.com](#) and search the Access Network. The chart below provides an overview of your vision plan.

| | In Network—Your Cost Share |
|---|---|
| Routine eye exam <i>Covered once every calendar year</i> | 100% |
| Lenses <i>Covered once every calendar year</i> | Covered at 100% per pair, standard plastic for single vision, bifocal, trifocal, lenticular |
| Frames <i>Covered once every calendar year</i> | Plan offers a \$150 retail allowance; you pay the balance less 20% discount |
| Contact lenses (in lieu of lenses) <i>Covered once every calendar year</i> | <p>– Conventional: Plan pays up to \$150 per pair; you pay the balance less 15% discount</p> <p>– Disposable: Plan pays up to \$150 per pair; you pay the balance</p> |
| Other services/features | Visit the Vision section of myHR located on the Exchange |

Out-of-Network Care

You will generally pay less out of pocket for in-network care; if you receive services from an out-of-network provider, the plan will pay a percentage of the reasonable and customary charges for the services you receive. That means you are responsible for your share of the cost, plus any amount above the reasonable and customary charges.



Health Plan Rates

2026 plan year rates.

Medical and Prescription coverage (pretax)

Per-Paycheck Rates¹

| Coverage Level | HDHP w/HSA | | PPO Plan w/HRA | |
|--|---|--------------------------------------|---|--------------------------------------|
| | Low Premium <i>Incentives Earned</i> | High Premium <i>No Incentives</i> | Low Premium <i>Incentives Earned</i> | High Premium <i>No Incentives</i> |
| Associate | \$55.55 | \$55.55 | \$101.90 | \$151.90 |
| Associate + Child(ren) | \$151.95 | \$201.95 | \$193.85 | \$243.85 |
| Associate + Spouse/Domestic Partner ² | \$168.00 | \$218.00 | \$214.30 | \$264.30 |
| Family ³ | \$256.10 | \$306.10 | \$326.50 | \$376.50 |

Dental and Vision coverage (pretax)

| Coverage Level | Per-Paycheck Rate |
|--|-------------------|
| Associate | \$7.00 |
| Associate + Child(ren) | \$13.30 |
| Associate + Spouse/Domestic Partner ³ | \$14.70 |
| Family ³ | \$22.40 |

¹ Medical/prescription plan premium incentives: \$50 per paycheck (\$1,200 per year) for completing **both** a biometric screening and a health assessment. New hires will automatically receive the "Low Premium" for the first calendar year of coverage.

² Due to IRS regulations, the fair market value of domestic partner and domestic partner child(ren) coverage is treated as imputed income. The fair market value consists of both the premiums an associate pays for this coverage as well as the amount T. Rowe Price pays. This amount is included in an associate's taxable income and will appear on his or her Form W-2. Visit [myHR](#) for more information on imputed income.

³ Family coverage includes domestic partner and domestic partner child(ren).



Voluntary Benefits

Voluntary benefits are optional benefits that provide supplemental coverage for a variety of situations: accidents, critical illness, hospitalization, legal services, pet coverage, supplemental life insurance, and auto and homeowners insurance.

The following plans are offered at discounted group rates and are 100% paid by you via payroll deduction. You can only enroll in these plans during open enrollment or new hire benefit enrollment.

- **Accident Plan**

The Aetna Accident Plan pays cash benefits to you when you get treatment for an accidental injury. The plan pays based on a [schedule of benefits](#).

- **Critical Illness Plan**

The Aetna Critical Illness Plan pays cash benefits to you when a doctor diagnoses you with a critical illness or condition, such as cancer, heart attack, or stroke. [Two levels of coverage are available](#)—\$15,000 and \$30,000—and they are priced based on your age.

- **Hospital Plan**

The Aetna Hospital Plan pays cash benefits directly to you if you are admitted to the hospital for a covered inpatient stay. Two levels of coverage are offered—[low and high](#).

- **MetLife Legal Plans**

The MetLife Legal Plan covers you for the many common legal issues your family faces. Telephone and office consultations are available for an unlimited number of personal legal matters with a network

attorney of your choice. MetLife Legal Plans now cover the costs of legal services related to reproductive assistance matters such as surrogacy, egg, sperm, or embryo adoption. With Reproductive Assistance Law coverage, you are covered for the first 20 hours of legal service and court work related to reproductive assistance matters. Surrogacy and reproductive assistance laws vary by State.

- Legal plan enrollment also includes customized and holistic caregiving assistance through Family First. You and your family will have access to a highly trained Care Team, who can help navigate caregiving challenges.
 - There are two plan options to select from: The MetLife Legal Plan offers services to associates, spouses, and eligible dependents, and the MetLife Legal Plan Plus Parents provides additional coverage for selected services for your parents. Go to [Workday](#) for legal plan enrollment.

Additional discount offerings are available on [YouDecide](#).



Voluntary Benefit Rates

Accident Plan

| Coverage Level | Per-Paycheck Rates |
|-------------------------------------|--------------------|
| Associate | \$4.64 |
| Associate + Child(ren) | \$8.88 |
| Associate + Spouse/Domestic Partner | \$8.28 |
| Family | \$12.06 |

Critical Illness Plan

| Coverage Level | Per-Paycheck Rates | | | |
|------------------------|-------------------------------------|--|-------------------------------------|--|
| | \$15K Coverage | | \$30K Coverage | |
| Associate Rates at Age | Associate or Associate + Child(ren) | Associate + Spouse/ Domestic Partner or Family | Associate or Associate + Child(ren) | Associate + Spouse/ Domestic Partner or Family |
| <25 | \$0.99 | \$2.16 | \$1.97 | \$4.33 |
| 25-29 | \$1.58 | \$3.36 | \$3.16 | \$6.71 |
| 30-34 | \$2.04 | \$4.29 | \$4.09 | \$8.58 |
| 35-39 | \$2.78 | \$5.76 | \$5.56 | \$11.51 |
| 40-44 | \$4.09 | \$8.37 | \$8.18 | \$16.75 |
| 45-49 | \$6.24 | \$12.69 | \$12.49 | \$25.39 |
| 50-54 | \$9.82 | \$19.85 | \$19.64 | \$39.70 |
| 55-59 | \$14.93 | \$30.06 | \$29.85 | \$60.13 |
| 60-64 | \$21.51 | \$43.25 | \$43.03 | \$86.50 |
| 65-69 | \$29.74 | \$59.71 | \$59.48 | \$119.42 |
| 70+ | \$37.64 | \$75.51 | \$75.28 | \$151.03 |

¹ Covers associate, spouse/domestic partner, and dependents.

² Covers associate, spouse/domestic partner, dependents, parents, and parents-in-law.

Hospital Plan

| Coverage Level | Per-Paycheck Rates | |
|-------------------------------------|--------------------|---------|
| | Low | High |
| Associate | \$6.44 | \$11.16 |
| Associate + Child(ren) | \$10.29 | \$17.14 |
| Associate + Spouse/Domestic Partner | \$13.50 | \$22.50 |
| Family | \$16.08 | \$26.78 |

Based on associate's age as of January 1 each year.
Note: No cost for child(ren) coverage.

Legal Plans

| Plan | Per-Paycheck Rates |
|---|--------------------|
| MetLife Legal Plan ¹ | \$9 |
| MetLife Legal Plan Plus Parent ² | \$12 |

MetLife Supplemental Life Insurance

| Age | Monthly Rates per \$1,000 of Coverage | |
|-------|---------------------------------------|-------------------------|
| | Associate | Spouse/Domestic Partner |
| <25 | \$0.026 | \$0.040 |
| 25-29 | \$0.029 | \$0.060 |
| 30-34 | \$0.038 | \$0.080 |
| 35-39 | \$0.051 | \$0.090 |
| 40-44 | \$0.063 | \$0.110 |
| 45-49 | \$0.095 | \$0.160 |
| 50-54 | \$0.146 | \$0.290 |
| 55-59 | \$0.273 | \$0.470 |
| 60-64 | \$0.361 | \$0.830 |
| 65-69 | \$0.685 | \$1.430 |
| 70+ | \$1.109 | \$2.380 |

Monthly rates, paid with after-tax dollars. Rates are based on associates' age as of January 1 each year.
Dependent Child(ren): \$10,000 of coverage \$1.25 per month.



More Great Benefits

The benefits described here are only part of the total rewards available to you and your family. T. Rowe Price associates can visit [myHR](#) to learn more.

T. Rowe Price Additional Programs

Adoption assistance

You may be eligible to be reimbursed for certain expenses related to your adoption process. T. Rowe Price offers reimbursement of your eligible expenses up to a maximum of \$5,000 for one adopted child. The child must be age 15 or under at the time of the adoption and may not be a relative or a stepchild. Associates must have 12 months of continuous service at the time the adoption is finalized to be eligible for reimbursement.

Goldman Sachs Wealth Services financial wellness

Goldman Sachs provides personalized assistance in all areas of financial planning, such as debt management issues, cash flow planning, guidance on retirement and 401(k) investments, college funding, life insurance, and stock options.

- Goldman Sachs Wealth Services Telephonic Coaching at **888-295-9868**.
- Monday–Friday 9 a.m.–5 p.m. ET.
Evening appointments Monday–Thursday until 8 p.m. ET.



T. Rowe Price Additional Programs

Bright Horizons—family benefits

Explore all your benefits today, and start making your life easier.

- Backup child-care and eldercare
- Years Ahead eldercare support and resources
- College Coach and tutoring services

You also have access to a [free database](#) to find sitters, nannies, house cleaners, and pet care.

Call **1-877-BH-CARES (242-2737)**.

Community programs

T. Rowe Price has made a long-term commitment to helping others through its community outreach programs. Find out more about our volunteering and Matching Gift Program on [CommunityConnections](#) and on [myHR](#).

Discounts and passes

The Associate Advantages Program, powered by [YouDecide](#), provides associates with a single destination for discounts and offers free of charge. Save on pet insurance, auto & home insurance, identity theft protection, restaurants, movie tickets, vacation destinations, and much more.

The YouDecide portal is open year-round for savings.

Exercise and fitness club reimbursement

Eligible associates may receive reimbursement of up to \$300 per calendar year for eligible exercise and fitness club membership fees incurred and paid while employed by T. Rowe Price. This benefit is subject to prevailing tax law. You are eligible to participate as of your date of hire.

Learning programs

Expand your skills and knowledge through programs such as [Tuition Assistance](#) or [Degreed](#).

MetLife’s Will Preparation program

Employees who elect to have supplemental life insurance through T. Rowe Price are automatically eligible to participate in [MetLife’s Will Preparation Program](#) at no additional cost. This service covers the participating plan attorney’s fees to discuss the preparation or updating of the employee’s, spouse’s, and/or domestic partner’s will; preparation of the will(s); and preparation of codicils.

Aetna Resources for LivingSM: Employee Assistance Program (EAP)

This confidential program provides associates and their eligible family members with coaching and up to five counseling sessions free of charge. EAP services include help with personal/family issues, interpersonal matters, or other concerns you may have. Coverage is effective as of your date of hire.

Personify Health—wellness portal

Visit the [Wellness Portal](#) to explore your well-being benefits.



Healthy Rewards Program

For associates enrolled in the medical plan, we offer incentives that reward you for good choices. Healthy Rewards that you earn will either be used to lower your medical/prescription plan premiums or will be added to your HRA or HSA. You are strongly encouraged, but not required, to take advantage of the incentives offered.

Healthy actions—premium incentives

- **New Hires:** During your first plan year, you will pay the lowest medical/prescription premium.
- **Current Associates:** During your subsequent plan years, you will pay the lowest medical/prescription premiums if you complete both the health assessment and biometric screening detailed below.

Health assessment and biometric screening—\$50 premium incentive

A health assessment is a confidential questionnaire about your current health and lifestyle. When the results of this questionnaire are coupled with your biometric data (e.g., your blood pressure, cholesterol, glucose, body mass index), they offer good insights into your current health status and your potential for health issues down the road.

Our health assessment is administered by Aetna. You'll find it listed on Aetna's member website. Associates who don't complete the health assessment and a biometric screening will pay higher health care premiums of \$1,200 per year (\$50 per paycheck) than those who do.

HRA/HSA incentives

Associates can earn incentives that will be added to their HRA/HSA. These incentives are automatically added to your account when the healthy action is completed. HRA balances can be viewed on Aetna's website. HSA balances can be viewed on the HealthEquity site.

- **Preventive screening (mammogram)—\$50**

Annual screening mammograms are covered at 100% (in network) for women age 40 and over and earn \$50 in your HRA/HSA. Note that women will only earn an incentive for completing either a mammogram or a colonoscopy; but not both.

- **Preventive screening (colonoscopy)—\$50**

Preventive screening for members age 45 and over, performed once every 10 years, is covered at 100% (in network) and earns \$50 in your HRA/HSA.

View our wellness disclosures [here](#).



Healthy Rewards Program

HRA/HSA incentives (cont.)

- **Aetna In Touch Care calls—\$100**

If you are currently facing a health condition (e.g., asthma or high blood pressure), you can earn an incentive and learn more about managing it by participating in a health management program. Based on your claims information and/or responses to your health assessment, Aetna will reach out to you to offer you the option to participate in a program. If you feel you would benefit from a health management program but Aetna does not contact you, please call Aetna member services at 1-855-242-1496.

- **Condition management/lifestyle coaching—\$50**

Work one-on-one with a highly trained wellness coach to improve the way you feel every day. You can work with a coach toward one goal, such as losing weight, quitting smoking or tobacco, exercising more, eating better, sleeping better, managing stress, and/or preventing disease.

- **Maternity program—\$300**

Enroll in the Aetna Maternity Program prior to your 16th week of pregnancy to ensure that you have all the help you need to have a healthy pregnancy. You can earn \$300 to your HRA/HSA when you enroll in the program and complete the risk survey. Contact Aetna member services at 1-855-242-1496 to enroll.





Survivor Benefits

Life and accidental death and dismemberment (AD&D) insurance benefits offer you important financial protection in case of death or disabling injury.

Coverage

| T. Rowe Price-Paid Coverage | Associate-Paid Coverage |
|---|--|
| Basic Life Insurance -Provides three times your annual base salary <i>Maximum benefit: \$1.05 million</i> -You pay tax on imputed income for benefit amounts in excess of \$50,000 | Supplemental Life Insurance -Elect coverage of up to six times your annual base salary <i>Maximum benefit: \$1.5 million</i> |
| Accidental Death and Dismemberment -Provides additional coverage of three times your annual base salary <i>Maximum benefit: \$1.05 million</i> -Pays for accidental loss of life due to an accident | Dependent Life (Spouse/Domestic Partner) -Elect coverage in \$10,000 increments up to the lesser of \$300,000 or your basic life coverage amount |
| Business Travel Accident Insurance -Provides five times your annual base salary <i>Maximum benefit: \$2 million</i> -Pays for accidental loss of life if it occurs while traveling on firm business | Dependent Life (Child(ren)) -Elect coverage of \$10,000; covers all eligible children |

Choosing a beneficiary

Your beneficiary is the person or persons you select to receive your life and AD&D insurance benefits if you die. Be sure to keep your beneficiary designation in Workday current.

Associate-paid coverage

During your new hire enrollment period, you may elect three times your annual base salary of supplemental life, up to \$50,000 dependent spouse/domestic partner life, and up to \$10,000 dependent child life insurance without providing a statement of health form. If you are eligible for and decline this coverage during your new hire period, you will be required to submit a statement of health form for any future election.

Any amount elected over \$50,000 for dependent spouse/domestic partner life insurance or any amount greater than three times your annual base salary for supplemental life insurance requires a statement of health form. If approved, these coverage amounts will be effective either the first day of the month following your date of hire or the date approval is received from the carrier, whichever is later.



T. Rowe Price Time Off

The firm offers you paid time off benefits as a part of our commitment to supporting your well-being. We believe that taking breaks is an important part of a healthy work-life balance and allows associates time to refresh.

Paid time off

You can familiarize yourself with the T. Rowe Price time off policy detailed in the [U.S. Associate Handbook](#) when planning and using your time off benefits.

New Hires: Effective immediately upon employment you are eligible for your vacation time, one floating holiday, and one illness day. On your 91st day of employment all remaining paid time off will be available to you.

| First Calendar Year of Employment | | | | | |
|-----------------------------------|---|-----------------------|-------------------|-------------------------|----------------------|
| | Month of Hire | Non-Exempt Associates | Exempt Associates | | |
| Vacation | January | 12 days | 15 days | Personal Leave | |
| | February | 11 days | 14 days | | January–June 2 days |
| | March | 10 days | 13 days | | July–September 1 day |
| | April | 9 days | 11 days | October–December 0 days | Illness |
| | May | 8 days | 10 days | January–March 6 days | |
| | June | 7 days | 9 days | April–May 5 days | |
| | July | 6 days | 7 days | June–July 4 days | |
| | August | 5 days | 6 days | August–September 3 days | |
| | September | 4 days | 5 days | October–December 1 day | |
| | October | 3 days | 4 days | | |
| | November | 2 days | 3 days | | |
| | December | 1 day | 2 days | | |
| Holidays | Usually, there are 10 scheduled holidays per year, plus one floating holiday. T. Rowe Price follows the New York Stock Exchange holiday schedule. | | | | |
| Wellness Day | One day per calendar year. Associates actively employed as of December 31 of the prior year will be eligible for one wellness day in the current year, available in Workday on January 1. | | | | |

| Subsequent Calendar Years of Employment | | | | |
|---|---|-----------------------|-------------------|-----------------------|
| | Calendar Years Employed | Non-Exempt Associates | Exempt Associates | All Associates |
| Vacation | 2–3 years | 12 days | 15 days | Personal Leave |
| | 4–9 years | 15 days | 20 days | |
| | 10–15 years | 20 days | 20 days | Illness |
| | 16–24 years | 25 days | 25 days | |
| Holidays | Usually, there are 10 scheduled holidays per year, plus one floating holiday. T. Rowe Price follows the New York Stock Exchange holiday schedule. | | | |
| Wellness Day | One day per calendar year. Associates actively employed as of December 31 of the prior year will be eligible for one wellness day in the current year, available in Workday on January 1. | | | |



T. Rowe Price Time Off (cont.)

More information can be found on [myHR](#).

Short-term disability

If an illness or injury keeps you away from work for longer than seven calendar days, you may be eligible to receive short-term disability benefits. Benefits are based on length of service with the firm and are effective your first day of active employment.

Long-term disability

The long-term disability (LTD) plan covers eligible associates who become disabled and are unable to work due to an illness or accidental injury extending beyond 180 calendar days. The LTD benefit is 60% of your basic monthly earnings (base salary plus a three-year average of eligible bonuses) up to a maximum monthly benefit of \$25,000. T. Rowe Price pays the premium cost and adds 100% of this cost to your W-2 as taxable income. Any LTD benefits you may receive will be tax-free.

Family Leave

We recognize that the birth or adoption of a child is an important time in a family's life. Accordingly, to support that time, and depending on your circumstances, you may be eligible for one or more of the following benefits:

- **Maternity Short-Term Disability Leave**

Mothers are eligible for up to 10 weeks of Maternity Short-Term Disability Leave for recovering from childbirth.

- **Parental Leave**

New parents as the result of the birth or adoption of a child are eligible for up to six weeks of job-protected parental leave to be used within the first year following the birth of a child. For the mother of a newborn, this is in addition to Maternity Short-Term Disability Leave benefits.

If you are normally scheduled to work 30 or more hours per week with the firm, Maternity Short-Term Disability Leave and Parental Leave, as applicable, are paid. The benefit is based on your annual base salary on the date your leave begins.



Employee Stock Purchase Plan (ESPP)

You are automatically eligible to participate in the Employee Stock Purchase Plan and can change your election and/or beneficiary(ies) at any time. Contributing to the ESPP allows you to purchase shares of company stock with after-tax dollars. The company will make a matching contribution according to the plan rules. Before enrolling, please read the [ESPP summary and prospectus](#).

Enrolling

If you elect to participate in the ESPP, you must enroll online. Your online enrollment will include electing the percentage of your pay that you want to contribute to the plan as well as designating a primary beneficiary(ies). Enrollment instructions can be found on [myHR](#).

Please direct any questions to the TROW Stock Transactions Group:
TROW_EmployeeStockTransactions@troweprice.com.

Your ESPP contributions

- You may contribute from 1% to 10% of your base salary each payroll period
- You may increase or decrease your contributions in increments of 1% of your base salary at any time
- You may begin contributing on the first day of the month following your date of hire
- Contributions are deducted on an after-tax basis

Company ESPP contributions

The firm matches 50% of the first 4% of your base salary that you contribute until you've earned \$200,000 of base salary in a calendar year. Matching contributions will then stop and resume in the following calendar year.

Your individual ESPP account

ESPP purchases are made once a month on the last business day of the month.



U.S. Retirement Program

All regular full-time and part-time associates are eligible to enroll in the T. Rowe Price U.S. Retirement Program (401(k) plan) on their date of hire. If you have not enrolled in the plan 30 days after your hire date, you will automatically be enrolled to make a pretax contribution of 6% of your pay (you can elect a different percentage, including 0%, at any time). You have more than 70 investment options from which to choose.

Contributions

The company will make basic retirement contributions, and possibly a variable contribution to your account, on your behalf. These contributions will be held in an account in your name in the plan.

You may make pretax or Roth contributions (or a combination of the two) to your plan account. The company will make a matching contribution of 50% of the first 4% of pay that you contribute each pay period. You may be eligible to make a direct rollover contribution of taxable distributions from a prior employer's retirement plan into your account.

The plan has an automatic increase feature that can help you save a little more every year. If you are contributing from 1% to 9% on a pretax basis, auto-increase will automatically raise your pretax contributions by 1% on the first paycheck each year, up to a maximum of 10% (unless you opt out). You also can sign up for auto-increase at any time. When you sign up, you choose the month, the amount of the increase, and the cap at which increases will stop. You can cancel the service at any time.



Contributions

SECURE 2.0 Act

SECURE 2.0 provides that in the case of a catch-up eligible participant whose FICA wages for the preceding calendar year from the employer sponsoring the plan exceeds \$145,000 (indexed) then catch-up contributions must be designated Roth contributions (“Roth catch-up requirement”). Also, if any participants in a plan are subject to the Roth catch up requirement, then the plan must allow any catch-up eligible participant to make catch-up contributions as designated Roth contributions. These changes were initially effective for taxable years beginning after December 31, 2023. In August 2023, IRS issued Notice 2023-62, which provides a two-year transition period for compliance, i.e., compliance is required in taxable years beginning after December 31, 2025.

Beginning in January 2026, SECURE 2.0 requires associates with prior year FICA wages of more than \$145,000 (indexed) to contribute catch up contributions on a Roth basis.

If you have any questions regarding the provision and if it would impact you, please contact [myHR](#).

Additional information

Additional information on plan contributions and the pay on which they are based, along with all plan provisions, is available online on the T. Rowe Price Exchange (our intranet) and in the [summary plan description](#). While the summary plan description document is being provided to you electronically, please note that you may request a paper copy of this at no charge by calling Retirement Plan Services at **1-800-390-3467**.

You will need to designate retirement plan beneficiaries in the participant website.

Please read the [404\(a\)\(5\) Disclosure and Automatic Enrollment and Qualified Default Investment Alternative Notice](#) for important information.



Retirement Program Basics

| | Basic Retirement Account Fixed Company Contributions | 401(k) Pretax, Roth, and Company Matching Contributions | 401(k) Plus Variable Company Contributions |
|----------------------------------|--|---|--|
| Plan Features | <ul style="list-style-type: none"> –Each pay period, the firm automatically contributes an amount equal to 4.5% of your eligible compensation. –If your eligible compensation during the calendar year reaches the Social Security taxable wage base (\$176,100 in 2025), the firm contributes an additional amount equal to 4.5% of your eligible compensation above the Social Security taxable wage base. | <ul style="list-style-type: none"> –You may make pretax and/or Roth contributions to the 401(k) plan up to 75% of your eligible compensation for each pay period, subject to the annual limit of \$23,500 in 2025. If you will be age 50 or older by the end of the year, the catch-up contribution limit for 2025 is \$7,500. –You will be automatically enrolled to make a before-tax contribution of 6% unless you elect a different percentage (including 0%). –Each pay period, T. Rowe Price makes a matching contribution of 50% of the first 4% of the eligible compensation you contribute. | <ul style="list-style-type: none"> –At the end of each year, the Management Compensation and Development Committee determines an amount from 0% to 6% of eligible compensation that the firm will contribute for each eligible associate. –You must be employed on the last day of the plan year to be eligible for the variable contribution. |
| Contributions¹ | <ul style="list-style-type: none"> –You do not have to contribute to the 401(k) plan to qualify for this company contribution. | <ul style="list-style-type: none"> –You can change your pretax and/or Roth contribution election at any time or opt out. | <ul style="list-style-type: none"> –You do not have to contribute to the 401(k) plan to qualify for this company contribution. |
| Vesting² | <ul style="list-style-type: none"> –You will become fully vested in the firm contributions over time. For each plan year that you work at least 1,000 hours, your vesting will increase 20%. | <ul style="list-style-type: none"> –You are always 100% vested in your contributions to the plan, including any rollover contributions. –You will become fully vested in the firm contributions over time. For each plan year that you work at least 1,000 hours, your vesting will increase 20%. | <ul style="list-style-type: none"> –You will become fully vested in the firm contributions over time. For each plan year that you work at least 1,000 hours, your vesting will increase 20%. |

¹All contribution types are subject to plan and IRS limits.

²You also will become 100% vested in your plan account when you retire from the company on or after age 65 or if you become totally disabled or die during employment.

Eligible compensation is limited to the IRS compensation limit.

As of the publication date of this Benefits Guide, the 2026 IRS contribution limits have not been released. Once they become available, updated 2026 limit amounts will be posted in the US Retirement Program myHR article and on the [U.S. Retirement Program](#) Member Portal.



Choose Your 401(k) Investments

You can decide how your contributions will be invested by choosing one or more of the investment options available through the plan. If you do not make an investment choice, your contributions will be invested automatically in the T. Rowe Price Retirement Trust designed to target the year an investor retires—assumed to be age 65.

Please read the [Automatic Enrollment and Qualified Default Investment Alternative Notice](#) for more detailed information.

The plan offers you two investment approaches. You can select an age-based investment option or create your own diversified mix using the build-your-own investment options. You choose the approach with which you're most comfortable.

Investment approaches

- **Age-based investments**

If you want a portfolio that automatically adjusts over time, consider investing in a T. Rowe Price Retirement Trust, which provides a diversified portfolio in a single investment designed to target the year an investor retires—assumed to be age 65.

- **Build-your-own approach**

If you prefer to have hands-on control over your investment mix, consider building your own portfolio. You choose from the plan's professionally managed investment options and manage your portfolio and asset allocation over time to suit your risk tolerance, time horizon, and financial goals.

Go to the website at rps.troweprice.com to view the complete list of investment options. You may change your investment selection at any time, or exchange from one investment to another at any time, by logging in to your account at rps.troweprice.com or by calling Retirement Plan Services at 1-800-390-3467.





Enrolling and Resources

Once you've made your decisions, it's time to enroll.

Enrollment quick facts

- Log in to [Workday](#) to complete your Benefits Enrollment located in your Workday inbox. When you log in to the system, you will be able to see all of your options. After you have made your elections, review your selections to ensure they are correct. Then click Submit to complete elections.
- **Current associates:** The open enrollment window is **October 22-November 5, 2025**. This deadline will not be extended. Be sure to submit your changes by November 5, 2025, for the January 1, 2026, benefit year.
- **New hires:** You have 30 days from your first day of employment to enroll or waive your benefit elections. Your coverage will begin on the 1st day of the month after your hire date. See [page 32](#) for detailed new hire enrollment instructions.
- You can access this link inside and outside the T. Rowe Price network.

Optional voluntary benefit elections

Elect Pet Insurance, Identity Theft, and Auto and Home coverage through the [YouDecide](#) portal.

Important reminders

- Enter all dependent information for all eligible dependents you are covering.
- Provide beneficiary(ies) for the following benefits you are participating in:
 - Basic Life Insurance
 - Supplemental and Dependent Life Insurance
 - Critical Illness
 - U.S. Retirement Program
 - Employee Stock Purchase Plan
- If you elect the HDHP w/HSA, you must elect the HSA with a contribution of \$0 or higher to receive the T. Rowe Price contribution.
- When completing your election, review and confirm that you have selected all of the family members you wish to cover for the upcoming plan year.
- For your records, you can print your enrollment confirmation in Workday prior to closing your enrollment window.



Resources

T. Rowe Price makes the following online resources available to help you learn, compare, choose your benefits coverage, and make your enrollment decisions.

Resources to learn more and ask questions:

- **Visit mytrpwellness.com**
mytrpwellness.com has all of the details about your benefit choices.
- **Contact Goldman Sachs Wealth Services**
[Goldman Sachs](#), our financial coaching vendor, offers no-cost financial counseling and education to T. Rowe Price associates. Financial coaches are trained in T. Rowe Price's benefit and compensation plans and can help you make enrollment decisions for you and your family. Connect with a coach at 1-888-295-9868 (Monday–Friday, 9 a.m.–5 p.m.) to better understand your benefit options and create a plan to help:
 - Align your benefits selections with your financial goals
 - Compare ways to fund your family's health care
 - Evaluate how much life and disability insurance coverage you need
 - Answer any other questions you have during annual enrollment
- **Medical Plan Comparison and Costs**
Use the [Health Equity Plan Comparison Tool](#) to estimate your annual medical plan costs.
- **Use these tools to estimate an appropriate contribution**
[Health Care Flexible Spending Account](#), [Dependent Care Flexible Spending Account](#), and [Health Savings Account](#).
- **Find Care and Pricing**
[This Aetna tool](#) helps you confirm that your current provider(s) is in Aetna's network. You can also find the provider's cost of care.

- **Compare Prescription Drug Costs by Plan**

Use the [Express Scripts tool](#) to compare your prescription drug costs based on your medical plan options.

- **Your Rights and Privacy Notices**

Review these [important notices](#) regarding your legal rights.

- **Summary of Benefits and Coverage (SBC)**

This is a standardized summary that is intended to make it easier for you to compare coverage options.

- [SBC PPO Plan with HRA](#)
- [SBC HDHP with HSA](#)
- [SBC Glossary of Health Coverage and Medical Terms](#)

Retirement plan tools:

You may need to register to gain access.

- **Morningstar Retirement Manager**

[Morningstar Retirement Manager](#) can help you decide on how much to save, where to invest it, and options for managing your money going forward.

- **Paycheck Impact Calculator**

Use [this simple calculator](#) to learn how a new or increased before-tax contribution may affect your paycheck.



New Hires: How to Enroll

U.S. Retirement Program enrollment

You are eligible to receive company-provided basic contributions. In addition, the company will automatically reduce your before-tax pay by 6% and contribute it to the plan. If you would like to elect a different pretax percentage and/or elect Roth 401(k) contributions (after tax), or if you do not wish to contribute at all, you must change your contribution by visiting the U.S. Retirement Program website.

The first time you log in to the [Workplace Retirement Site](#), you will be required to complete the registration process.

Steps for registering for the U.S. Retirement Program

- To register for the U.S. Retirement Program, please visit the [Workplace Retirement Site](#) website.
- Once there, click on Enable Online Access.
- You'll have to create a unique username, which can't be your T. Rowe Price employee ID or Social Security number, and a password.
- When you get to where you are asked to enter your personal identification number (PIN), you can skip that and move on.
 - Your PIN isn't necessary to access your account online; it's only for the Plan Account Line and will be mailed to you within about a week after you've been hired.
 - To reset your PIN or set one that's easier to remember, call the Plan Account Line at **1-800-390-3467** and say "Forgot Pin." You'll be transferred to the touch-tone system where you can reset your PIN.
- Once you've successfully registered and can see your account, you'll be able to log in through the **myRetirementPlan** link on the [Exchange homepage](#).

U.S. health benefits enrollment

Log in to [Workday](#) and select Let's Get Started to complete your Onboarding and Benefits Enrollment located in your Workday inbox. When you log in to the system, you will be able to see all of your options. You must submit your benefit elections within 30 calendar days from your date of hire.

After you have made your elections, review your selections to ensure they are correct. Then click Submit to complete your elections.

Optional voluntary benefit elections

Elect the MetLife Legal Plan in [Workday](#).

The Auto and Home coverage can be elected through the [YouDecide](#) portal.



Resource Contact Information

T. Rowe Price Benefits Contact Information

HR Shared Services/Global Benefits

Submit your request through [myHR](#) or call 1-877-477-3783

Employee Stock Purchase Plan

TRP ESPP team: 1-410-345-4100
Email: TROW_EmployeeStockTransactions@troweprice.com

Retirement Plan Services

1-800-390-3467
Email: TRP_US_Retirement_Program@troweprice.com
rps.troweprice.com

Health and Welfare Contact Information

Aetna

Medical Plans
Group #: 326402
1-855-242-1496
aetna.com

Voluntary Benefits

Group #: 802310
1-800-607-3366
myaetnasupplemental.com

Aetna EAP

Resources for Living
(Employee Assistance Program)
1-855-242-1496
mylifevalues.com
User name/password: mytrpeap

Goldman Sachs Wealth Services

Financial Coaching
1-888-295-9868
Monday through Friday, 9 a.m. to 5 p.m. ET,
evenings by appointment
[Financial Wellness Counseling](#)

Bright Horizons

Backup Care
1-877-BH-CARES
(1-877-242-2737)
clients.brighthouse.com/trowepricebh

Employment Verifications

1-800-996-7566
theworknumber.com
Employer code: 10567

Express Scripts

Prescriptions
Group #: TROWEPR
1-800-903-8320
express-scripts.com

EyeMed

Vision
Group #: 9733585
1-866-939-3633
eyemedvisioncare.com

Health Equity Plan Comparison Tool

comparemyhsa.com/troweprice

MetLife

Dental
Group #: 301131
1-866-832-5756
metlife.com/mybenefits

MetLife Legal Plan

1-800-821-6400
members.legalplans.com

Progyny

Fertility Provider
1-833-281-4837
progyny.com

The Hartford

FMLA, Short- and Long-Term Disability
1-877-538-1540
abilityadvantage.thehartford.com

Health Equity/WageWorks

FSA, HSA, and Commuter Plans
1-877-924-3967
healthequity.com or wageworks.com

YouDecide

Discount and Voluntary Benefits Portal
Within the T. Rowe Price network: [YouDecide](#)
Externally: youdecide.com/troweprice



Appendix

35 Medical Plan Comparison Charts



Medical Plan Comparison Charts

1-855-242-1496

Group Number 326402

aetna.com

| | Aetna HDHP with HSA | | Aetna PPO Plan with HRA | |
|---|--|---|--|---|
| | In-Network Benefits | Out-of-Network Benefits | In-Network Benefits | Out-of-Network Benefits |
| Plan Provisions | | | | |
| Deductible per CY <i>(applies to medical expenses only)</i> | \$1,700 individual coverage; \$3,400 for all other coverage levels* | \$1,700 individual coverage; \$3,400 for all other coverage levels* | \$500 individual coverage; \$1,000 for all other coverage levels* | \$500 individual coverage; \$1,000 for all other coverage levels* |
| Coinsurance | 20% | 40% | 10% | 30% |
| Maximum Out of Pocket (including deductible) per CY <i>(applies to medical expenses only)</i> | \$3,400 individual coverage; \$6,800 for all other coverage levels* | \$6,800 individual coverage; \$13,600 for all other coverage levels* | \$3,000 individual coverage; \$6,000 for all other coverage levels* | \$6,000 individual coverage; \$12,000 for all other coverage levels* |
| Lifetime Maximum Benefit | N/A | N/A | N/A | N/A |
| Inpatient/Outpatient Precertification | Required; \$400 penalty for non-precertification | Required; \$400 penalty for non-precertification | Required; \$400 penalty for non-precertification | Required; \$400 penalty for non-precertification |
| Plan Benefits | | | | |
| Preventive Care | 100% | 60% of allowable charges | 100% | 70% ¹ |
| Physician visits for illness/injury | 80% | 60% of allowable charges | 90% | 70% of allowable charges |
| Urgent Care facility | 80% | 60% of allowable charges | 90% | 70% of allowable charges |
| Emergency Room Care <i>(Within 72 hrs of injury or onset of illness that is life-threatening. No coverage for nonemergency use of emergency room.)</i> | 80% | 80% | 90% | 90% |
| Inpatient Hospitalization <i>(Physician services, Room, Board, Supplies)</i> | 80% | 60% of allowable charges | 90% | 70% of allowable charges |
| Extended Care Facility Treatment | 80%; 60 days per CY max* | 60% allowable charges; 60 days per CY max* | 90% ; 60 days per CY max* | 70% of allowable charges; 60 days per CY max* |

*Combined maximum for in- and out-of-network providers.
¹Benefit paid after deductible is met.
 CY = calendar year



Medical Plan Comparison Charts

| | Aetna HDHP with HSA | | Aetna PPO Plan with HRA | |
|---|--------------------------------|--|--|--|
| | In-Network Benefits | Out-of-Network Benefits | In-Network Benefits | Out-of-Network Benefits |
| Outpatient <i>(Physician/Surgery Services, Facility)</i> | 80% | 60% of allowable charges | 90% | 70% of allowable charges |
| Diagnostic Imaging, X-ray, Lab & Radiology | 80% | 60% of allowable charges | 90% | 70% of allowable charges |
| Chiropractic Care | 80%; 40-visit max per CY | 60% of allowable charges; 40-visit max per CY | 90%, 40-visit max per CY | 70% of allowable charges; 40-visit max per CY |
| Physical, Occupational, Speech Therapies | 80% | 60% of allowable charges | 90% | 70% of allowable charges |
| Outpatient Mental Health and Substance Abuse | 80% | 60% of allowable charges | 90% | 70% of allowable charges |
| Inpatient Mental Health and Substance Abuse | 80% | 60% of allowable charges | 90% | 70% of allowable charges |
| Acupuncture | 80%; 15 visits per CY* | 60% of allowable charges; 15 visits per CY* | 90%; 15 visits per CY* | 70% of allowable charges; 15 visits per CY* |
| Ambulance Service <i>(emergency and approved medically necessary transport only)</i> | 80% | 80% | 90% | 90% |
| Diagnostic Tests and X-rays <i>(service only)</i> | 80% | 60% of allowable charges | 90% | 70% of allowable charges |
| Durable Medical Equipment | 80%; precertification required | 60% of allowable charges; precertification required | 90%; precertification required | 70% of allowable charges; precertification required |
| Home Health Care | 80%; 120-visit limit per CY | 60% of allowable charges; 120-visit limit per CY | 90%; 120-visit limit per CY | 70% of allowable charges; 120-visit limit per CY |
| Hospice Care—Inpatient/Outpatient | 80% | 60% of allowable charges | 90% | 70% of allowable charges |
| Retail Prescription Drugs, Express Scripts <i>(up to 30-day supply)</i> | 80% subject to deductible | N/A | Generic: \$10 copay Preferred: \$35 copay Non-Preferred: \$70 copay | N/A |
| Home Delivery Prescription Drugs, Express Scripts <i>(up to 90-day supply)</i> | 80% subject to deductible | N/A | Generic: \$20 copay Preferred: \$70 copay Non-Preferred: \$140 copay | N/A |

*Combined maximum for in- and out-of-network providers.
¹Benefit paid after deductible is met.
 CY = calendar year



Medical Plan Comparison Charts

Infertility coverage with Progyny

T. Rowe Price has partnered with [Progyny](#) to offer an inclusive fertility benefit. Progyny covers all eligible associates¹ and their partners who want to have a child or preserve their fertility, including single parents and LGBTQ+ individuals and couples.

Contact Progyny to speak with a Patient Care Advocate to begin your benefit coverage. Some services may require precertification.

- Comprehensive fertility treatment is offered as part of your medical plan, and coverage is administered by Progyny.
 - This benefit includes comprehensive fertility treatment coverage, fertility medication through the Progyny Rx network, access to a premier network of fertility specialists, and personalized emotional support and guidance from dedicated Patient Care Advocates.
- Your cost share for these services, including fertility medication, is based on the medical plan coinsurance and limited to a set number of attempts.
- To learn more, visit progyny.com or call Progyny at **1-833-281-4837**.

Please Note: Payments are based on Aetna’s “allowable charges” amount. For in-network providers, the benefit is payable directly to the provider and is accepted as payment in full, except for any applicable member payment amounts (deductibles or coinsurances). Out-of-network service providers may bill the member for the difference between the allowable charges and their charges.

Prescriptions

- Drugs that are excluded from the plan’s formulary are not covered under the plan.
- Other non-covered items include, but are not limited to, immunizations and over-the-counter medications.
- If generic is available and you choose a brand-name medication, you pay the difference in cost between the brand name and generic drug plus generic copay/coinsurance.
- Fertility medications are covered under the Progyny benefit and are subject to the medical plan coinsurance.
- As new drugs are approved by the FDA, the drug manufacturer may change the generic/brand name code on an existing drug, causing the copayment level to vary.

¹Progyny benefits are available for the covered employee and spouse/domestic partner; the infertility coverage does not extend to adult covered dependent children.



This Benefits Guide provides highlights of T. Rowe Price's flexible benefit plans, retirement plan, and voluntary plans. T. Rowe Price has made every effort to ensure that this Benefits Guide accurately reflects plan documents and contracts. If there is any inconsistency between this Benefits Guide and those documents or contracts, the documents or contracts will take precedence.

T. Rowe Price reserves the right to terminate or amend its benefit plans at any time and for any reason.

Contact Human Resources if you have any questions that are not answered in this guide. Summary plan descriptions are available on [myTRPwellness.com](https://www.myTRPwellness.com) or you may request a hard copy at any time via [myHR](#) or calling **1-877-477-3783**.